

**APPLICATION FOR SUBDIVISION APPROVAL**  
**CITY PLANNING BOARD**  
**Concord, NH**

**General Information**

**Page 1**

*Owner's Name:* \_\_\_\_\_

*Address/ Street Number:* \_\_\_\_\_

*City & State:* \_\_\_\_\_ *Telephone:* \_\_\_\_\_

*Agent's Name (if applicable):* \_\_\_\_\_

*Address/ Street Number:* \_\_\_\_\_

*City & State* \_\_\_\_\_ *Tel.* \_\_\_\_\_ *Fax:* \_\_\_\_\_

*Type of Subdivision:* Major ☐ Minor ☐ Manufactured Housing ☐ CDP ☐

*For the property being developed, complete the following:*

*Street Address:* \_\_\_\_\_

*Abutting Streets:* \_\_\_\_\_

*Gross Floor Area:* Existing \_\_\_\_\_ *Proposed* \_\_\_\_\_

*Assessor's Map/Block/Lot(s):* \_\_\_\_ / \_\_\_\_ / \_\_\_\_ \_\_\_\_ / \_\_\_\_ / \_\_\_\_ \_\_\_\_ / \_\_\_\_ / \_\_\_\_

*Project Area:* \_\_\_\_\_ *acres (or)* \_\_\_\_\_ *square feet*

*Briefly Describe the Purpose of the Subdivision and the Proposed use of the Property:*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Professional Support**

Indicate the name, profession and telephone number of each individual in the preparation of components of the application.

*Name:* \_\_\_\_\_ *Profession:* \_\_\_\_\_ ( ) \_\_\_\_\_

*Address:* \_\_\_\_\_

*Name:* \_\_\_\_\_ *Profession:* \_\_\_\_\_ ( ) \_\_\_\_\_

*Address:* \_\_\_\_\_

*Name:* \_\_\_\_\_ *Profession:* \_\_\_\_\_ ( ) \_\_\_\_\_

*Address:* \_\_\_\_\_

**Zoning Information****Page 2***Existing Zoning Districts:* \_\_\_\_\_*Overlay Districts:**(check as appropriate)*    Historic (HI) ☐    Shoreland Protection (SP) ☐  
Flood Hazard (FH) ☐    Penacook Lake Watershed Protection (WS) ☐**Special Approvals Required:**

	YES	NO	
US Army Corps of Engineers	<input type="checkbox"/>	<input type="checkbox"/>	Date Applied: _____
Dredge & Fill Permit			
NH Wetland Board (wetland alteration)	<input type="checkbox"/>	<input type="checkbox"/>	Date Applied: _____
NH Dept. of Environmental Services			
Site Specific Permit (RSA 541-A:22)	<input type="checkbox"/>	<input type="checkbox"/>	Date Applied: _____
Water Quality & Sewer Discharge Permit	<input type="checkbox"/>	<input type="checkbox"/>	Date Applied: _____
Subdivision Approval for On-site Septic Systems	<input type="checkbox"/>	<input type="checkbox"/>	Date Applied: _____
NH Dept. of Transportation Driveway Permit	<input type="checkbox"/>	<input type="checkbox"/>	Date Applied: _____

**Endorsement:**

I hereby request that the City of Concord Planning Board review this application for Subdivision Plan approval, including all plans, documents and information herewith. I represent to the best of my knowledge and belief, this application is being submitted in accordance with the Subdivision Plan Review Regulations of the City Planning Board of the City of Concord, NH.

\_\_\_\_\_  
Signature of Property Owner                      Date                      Signature of Agent (if any)                      Date

An application fee is submitted herewith in the amount of \$\_\_\_\_\_.

**Staff Use Only**

Application No. _____ - _____	Application Type _____	Fee \$ _____
Staff Planner _____	Land Use Type _____	Project Name _____